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**UNITED STATES DISTRICT COURT
CENTRAL DISTRICT OF CALIFORNIA**

T.A. and S.A., minors by and through
their Guardian ad Litem JULIETTA
CHURCHER;
ALBERTO HURTADO; LINDA
LEE STEELE;
ALEXANDER ARENAS; KRISTIN
ARENAS

Plaintiffs,

v.

CITY OF DOWNEY, DOES 1-10

Defendants.

Case No.: 2:25-cv-05555-MCS (ASx)

**DECLARATION OF JULIETTA
CHURCHER AS GUARDIAN AD
LITEM FOR MINOR PLAINTIFF S.A.
(C.C.P. § 377.32)**

**C.C.P. § 377.32 DECLARATION OF JULIETTA CHURCHER FOR S.A.,
SUCCESSOR IN INTEREST TO ALBERTO ARENAS**

I, JULIETTA CHURCHER, do hereby declare as follows:

1 1. My name is JULIETTA CHURCHER. I am a competent adult over the
2 age of eighteen and the natural mother of minor plaintiff S.A.

3 2. I am personally familiar with the facts contained herein and would and
4 could competently testify thereto if called upon to do so.

5 3. The name of the decedent in this action is Alberto Arenas
6 (“Decedent”).

7 4. S.A. is Decedent’s child. He is Decedent’s successor in interest as
8 defined in Section 377.11 of the California Code of Civil Procedure as his biological
9 child.

10 5. No other persons have a superior right to commence this action.

11 6. Everett’s death certificate is filed concurrently as Exhibit A.

12
13 I, JULIETTA CHURCHER, declare under penalty of perjury under the laws
14 of the State of California that the foregoing is true and correct.

15
16 Executed on 6/23/2025 2025 in Los Angeles, California.

Signed by:



A3D0E58D3D084F2...

JULIETTA CHURCHER

EXHIBIT A

STATE OF CALIFORNIA COUNTY OF LOS ANGELES DEPARTMENT OF PUBLIC HEALTH									
CERTIFICATE OF DEATH					3202419032637				
STATE FILE NUMBER 3052024148385					LOCAL REGISTRATION NUMBER				
1. NAME OF DECEDENT - FIRST (Given)		2. MIDDLE		3. LAST (Family)		4. DATE OF BIRTH mm/dd/yyyy		5. AGE Yrs.	
ALBERTO		NICHOLAS		ARENAS		01/07/1995		29	
6. SEX		7. DATE OF DEATH mm/dd/yyyy		8. HOUR (24 Hour)		9. UNDER ONE YEAR		10. UNDER 24 HOURS	
M		06/29/2024		2044 EST		Months		Days	
11. EVER IN U.S. ARMED FORCES?		12. MARITAL STATUS/SPOUSE (at Time of Death)		13. DECEASED'S RACE - Up to 3 races may be listed (see worksheet on back)		14. DECEASED'S SEX		15. YEARS IN OCCUPATION	
NO		NEVER MARRIED		WHITE		M		1	
16. SOCIAL SECURITY NUMBER		17. USUAL OCCUPATION - Type of work for most of life. DO NOT USE RETIRED		18. KIND OF BUSINESS OR INDUSTRY (e.g., grocery store, road construction, employment agency, etc.)		19. DECEASED'S RESIDENCE (Street and number, or location)		20. COUNTY/PROVINCE	
625-86-0581		MANUFACTURER		MANUFACTURING MEDICAL SUPPLIES		7118 STEWART AND GRAY RD		LOS ANGELES	
21. CITY		22. ZIP CODE		23. YEARS IN COUNTY		24. STATE/FOREIGN COUNTRY		25. DECEASED'S RESIDENCE (Street and number, or location)	
DOWNEY		90241		29		CA		7118 STEWART AND GRAY RD, DOWNEY, CA 90241	
26. INFORMANT'S NAME, RELATIONSHIP		27. INFORMANT'S MAILING ADDRESS (Street and number, or rural route number, city or town, state and zip)		28. NAME OF FATHER/PARENT - FIRST		29. MIDDLE		30. LAST (BIRTH NAME)	
LINDA LEE STEELE, MOTHER		7118 STEWART AND GRAY RD, DOWNEY, CA 90241		ALBERTO		ARENAS		HURTADO	
31. NAME OF MOTHER/PARENT - FIRST		32. MIDDLE		33. LAST (BIRTH NAME)		34. BIRTH STATE		35. BIRTH STATE	
LINDA		LEE		STEELE		CA		CA	
36. DISPOSITION DATE mm/dd/yyyy		37. PLACE OF FINAL DISPOSITION		38. SIGNATURE OF EMBALMER		39. LICENSE NUMBER		40. DATE mm/dd/yyyy	
07/18/2024		PARK LAWN CEMETERY 6555 E GAGE AVE, COMMERCIA, CA 90040		ARTURO Y MUNOZ		EMB9567		07/15/2024	
41. TYPE OF DISPOSITION		42. NAME OF FUNERAL ESTABLISHMENT		43. LICENSE NUMBER		44. SIGNATURE OF LOCAL REGISTRAR		45. DATE mm/dd/yyyy	
BURIAL		ALLEN - ENGLISH & ESTRADA FUNERAL SERVICE		FD743		MUNTU DAVIS MD		07/15/2024	
46. PLACE OF DEATH		47. IF HOSPITAL, SPECIFY ONE		48. IF OTHER THAN HOSPITAL, SPECIFY ONE		49. DEATH REPORTED TO CORONER		50. DEATH REPORTED TO CORONER	
ALLEY		IP		Hospice		YES		NO	
51. COUNTY		52. FACILITY ADDRESS OR LOCATION WHERE FOUND (Street and number, or location)		53. CITY		54. DEATH REPORTED TO CORONER		55. DEATH REPORTED TO CORONER	
LOS ANGELES		7118 STEWART AND GRAY RD		DOWNEY		YES		NO	
56. CAUSE OF DEATH		57. IMMEDIATE CAUSE (Final disease or condition resulting in death)		58. SECS		59. BIOPSY PERFORMED?		60. BIOPSY PERFORMED?	
GUNSHOT WOUNDS		GUNSHOT WOUNDS		2024-10409		YES		NO	
61. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RESULTING IN THE UNDERLYING CAUSE GIVEN IN 107		62. WGS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 107 OR 112? (If yes, list type of operation and date.)		63. DECEASED PREGNANT IN LAST YEAR?		64. YES		NO	
NONE		NO		YES		NO		UNK	
65. I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE DEATH OCCURRED AT THE HOUR, DATE AND PLACE STATED FROM THE CAUSES STATED.		66. SIGNATURE AND TITLE OF CERTIFIER		67. LICENSE NUMBER		68. DATE mm/dd/yyyy		69. DATE mm/dd/yyyy	
REGINA AUGUSTINE		REGINA AUGUSTINE		47		07/11/2024		07/11/2024	
70. TYPE ATTENDING PHYSICIAN'S NAME, MAILING ADDRESS, ZIP CODE		71. INJURED AT WORK?		72. INJURY DATE mm/dd/yyyy		73. HOUR (24 Hour)		74. HOUR (24 Hour)	
7118 STEWART AND GRAY RD, DOWNEY, CA 90241		YES		06/29/2024		2025		2025	
75. PLACE OF INJURY (e.g., home, construction site, wooded area, etc.)		76. DESCRIBE HOW INJURY OCCURRED (Events which resulted in injury)		77. LOCATION OF INJURY (Street and number, or location, and city, and zip)		78. SIGNATURE OF CORONER / DEPUTY CORONER		79. TYPE NAME, TITLE OF CORONER / DEPUTY CORONER	
OTHER: ALLEY		SHOT BY OTHER(S)		7118 STEWART AND GRAY RD, DOWNEY, CA 90241		REGINA AUGUSTINE		REGINA AUGUSTINE, DEP CORONER	
80. STATE REGISTRAR		81. CENSUS TRACT		82. FAX AUTH.#		83. CENSUS TRACT		84. CENSUS TRACT	
A		B		C		D		E	

CERTIFIED COPY OF VITAL RECORD
STATE OF CALIFORNIA, COUNTY OF LOS ANGELES

This is a true certified copy of the record filed in the County of Los Angeles.